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Bib Data Sheet

CONFIRMATION NO. 4468

|   |   |                                   |   |   |                                |
|---|---|-----------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/025,631  | <b>FILING DATE</b><br>12/26/2001<br><b>RULE</b>   | <b>CLASS</b><br>714               | <b>GROUP ART UNIT</b><br>2184   | <b>ATTORNEY DOCKET NO.</b><br>P16212US1 |                                |
| <b>APPLICANTS</b><br>Bobby That Dao Ton, Lachine, CANADA;<br>Tormod Hegdahl, Oslo, NORWAY;<br>Lev Deich, Brossard, CANADA;  |   |                                   |   |   |                                |
| <b>** CONTINUING DATA *****</b>   |   |                                   |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                   |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 01/28/2002</b>  |   |                                   |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CANADA | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>26               | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br><div style="text-align: right;">AIR MAIL</div> SANDRA BEAUCHESNE<br>Ericsson Canada Inc.<br>Patent Department (LMC/UP)<br>8400 Decarie Blvd.<br>Town Mount Royal , QC H4P 2N2<br>CANADA   |   |                                   |   |   |                                |
| <b>TITLE</b><br>Method and gateway GPRS support node (GGSN) for user (payload) plane redundancy   |   |                                   |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>1062  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |